COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

Attorney's Docket Number: 6248,200-US

As a below named inventor, I hereby declare that:

Composition for IVF

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

The specification of which (check only one item below): [] is attached hereto [X] was filed as United States application
Application NoTo be assigned
on February 5, 2002
and was amended
on
[] was filed as PCT international application Number
on
and was amended under PCT Article 19
on

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filling date of the prior application and the national or PCT international filling date of the continuation-in-part application.

I hereby claim priority benefits under Title 35, United States Code, §119 of any provisional or foreign application(s) for patent or inventor's certificate or of any PCT international applications(s) for patent or inventor's certificate or of any PCT international applications(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL/FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 110-

	OREIGNICI AFFEICATION		INIS UNDER 33	U.S.C. 119:
COUNTRY		DATE OF FILING		Y CLAIMED
(if PCT, indicated "PCT")	APPLICATION NUMBER	(day, month, year)	UNDER	35 USC 119
Denmark	PA 2001 00189	6 February 2001	[X] YES	[]NO
Denmark	PA 2001 00382	8 March 2001	[X] YES	[]NO
U.S.A.	60/273,162	2 March 2001	[X] YES	[]NO
			[]YES	[]NO
			[]YES	[]NO

Attorney's Docket Number: 6248.200-US

I bereby claim the benefit under Title 35, United States Code 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insoft as the subject matter of each of the claims of this applications is not disclosed in flust/flow; proor application(s) in the manner provided by the first paragraph of Title 52, United States Code, 11(2, 1 acknowledge the duty to disclose matterial information as defined. That It at 37, Code of Federal Regulations, 1,35(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this applications.

		PRIOR U	S APPLICATIO	NS OR PCT INTE	RNATIONAL APPLICATIONS DESIGNAT UNDER 35 U.S.C 120.	ING THE U	S FOR BENE	FIT		
_			U.S. AF	PLICATIONS			STAT	US (Check one)	
_	U.S APPLIC	ATION NUMBI	ER		U.S FILING DATE	Р	atented	Pending	Abandoned	
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	APPLICATION			NG DATE	US SERIAL NUMBERS ASSIGNED (if any)					
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POV	WER OF ATTORNEY demark Office connects	: As a named in ed therewith.	Reza Green	Peter J.		application :	and transact al	I business in the Pa	tent and	
Sei	Reg. No. 38,475 F Send Correspondence for Reza Green, Esq. Novo Nordisk of North America, Inc 405 Lexington A venue, Suite 6400 New York, New York 10174-6400				leg No 43,228 Reg No. 36,459	Direct Telephone Calls To: Reza Green (212) 867-0123				
1	Full Name of Inventor	Family Nan	ic		First Given Name Tina		Second Gi			
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3	Full Name of Inventor	Family Nam	e		First Given Name		Second Giv			
	Residence & Citizenship	City			State or Foreign Country		Country of	Citizenship		
	Post Office Address	Post Office /			City		State & Zip	Code/Country		
4	Full Name of Inventor	Family Nam	e		First Given Name		Second Giv	en Name		
	Residence & Citizenship	City			State or Foreign Country		Country of	Citizenship		
	Post Office Address	Post Office A	dd ress		City		State & Zip	Code/Country		

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5	Full Name of Inventor	Family Name		First Given Name	Second Given Name
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address		City	State & Zip Code/Country
6	Full Name of Inventor	Family Name		First Given Name	Second Given Name
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address		City	State & Zip Code/Country
7	Full Name of Inventor	Family Name		First Given Name	Second Given Name
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address		City	State & Zip Code/Country
8	Full Name of Inventor	Family Name		First Given Name	Second Given Name
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address		City	State & Zip Code/Country
9	Full Name of Inventor	Family Name		First Given Name	Second Given Name
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address		City	State & Zip Code/Country
	further that ti	iese statements were made with the	knowledge that will	dge are true and that all statements made on informa fail false statements and the like so made are punisha ful false statements may jeopardize the validity of the	ble by fine or imprisonment or both under
Sign	sture of Inventor 1		Signature of Inv	entor 2	Signature of Inventor 3
Date			Date		Date
Sign	sture of Inventor 4		Signature of Inv	entor 5	Signature of Inventor 6
Date			Date		Date